

DEPOSIT AND / OR LOAN PAYMENT SLIP

ACCOUNT NUMBER	EMPLOYEE / ASSOCIATE NUMBER	PLEASE PRINT NAME	DATE
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LIST CHECKS SINGLY	AMOUNT
TOTAL	

DISTRIBUTE THE ENCLOSED AMOUNT AS FOLLOWS:

DEPOSIT TO	DOLLARS	CENTS
<input type="checkbox"/> Savings #		
<input type="checkbox"/> Checking #		
<input type="checkbox"/> CD _____ MO.		
<input type="checkbox"/> IRA contribution for 20 _____		
<input type="checkbox"/> VISA #		
<input type="checkbox"/> VISA #		
<input type="checkbox"/> Loan Payment #		
<input type="checkbox"/> Loan Payment #		
<input type="checkbox"/> Loan Payment #		
<input type="checkbox"/> Other		
TOTAL		

Two party checks should be endorsed "For deposit only" followed by Signature of Payee.

NOTICE: HFCU MAY PLACE A HOLD FOR UNCOLLECTED FUNDS ON AN ITEM YOU DEPOSIT. THIS COULD DELAY YOUR ABILITY TO WITHDRAW SUCH FUNDS. FOR FURTHER DETAILS SEE OUR DISCLOSURE OF FUNDS AVAILABILITY POLICY.

FOR YOUR SAFETY **DO NOT MAIL CASH**

↑ THESE TOTALS MUST MATCH ↓

WITHDRAWAL AND / OR TRANSFER SLIP

ACCOUNT NUMBER	EMPLOYEE / ASSOCIATE NUMBER	PLEASE PRINT NAME	DATE
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MEMBER SIGNATURE REQUIRED

NOTICE: WITHDRAWAL CHECKS WILL BE MAILED TO HOME ADDRESS

WITHDRAWAL \$ _____

FROM: AMOUNT

Savings # _____

Checking # _____

VISA # _____

Other _____

Other _____

TRANSFER AMOUNT \$ _____

FROM:

Savings # _____

Checking # _____

IRA _____

VISA # _____

Other _____

TO:

Savings # _____

Checking # _____

IRA CD _____

VISA # _____

Other _____